

MAY 01 2018

Page 1 of 13

UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT

For New Members, Candidates, and New Employees

18 MAY -7 PH 12: 29

Name: TIM HA MBS

Daytime Telephone: _____

U.S. HOUSE OF REPRESENTATIVES
CIVIL SERVICE COMMISSION

U (Office Use Only)

FILER STATUS	New Member of or Candidate for U.S. House of Representatives Candidates – Date of Election:	State: <u>OK</u> District: <u>FIFTH</u>	Check if Amendment
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	New Officer or Employee Employing Office: _____	Staff Filer Type (if Applicable): Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>	Period Covered: January 1, <u>2017</u> to <u>April 1, 2019</u>
			A \$200 penalty shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child:
a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Yes No

b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?

c. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?

d. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?

E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? Yes No

F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? Yes No

G. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? Yes No

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "exempted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? Yes No

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes No

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Tim Harris

Page 2 of 13

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Tim Harris Page 3 of 13

SP. ID.	ASSET NAME	EF	BLOCK A Assets and/or Income Sources	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK D											
							A	B	C	D	E	F	G	H	I	J	K	L
	Harbor International Fund Instl CL				None													
	JP Morgan Corp Plus Bond CL Select	X			\$1-\$1,000													
	Oppenheimér Déveloping Märkte	X			\$1,001-\$15,000													
	FD CLA	X			\$15,001-\$50,000													
	AIG Focused Dividend Strategy FD C	X			\$50,001-\$100,000													
	ML Bank Deposit Program	X			\$100,001-\$250,000													
	Cash	X			\$250,001-\$500,000													
	Maricopa Co AZ Ind Dev RV IDR	X			\$500,001-\$1,000,000													
	BDS AMT	X			\$1,000,001-\$5,000,000													
	Alvin Tex Indpl Sch Dist	X			\$5,000,001-\$25,000,000													
	Salt Verde Finl Corp St Gás Rev Ariz	X			Over \$25,000,000													
	Eagle MTN & Saginaw Tex Indpt Sch Dist	X			Spouse/DC Asset over \$1,000,000*													
	Laredo Tex CTFS Oblig Ser A OID	X			NONE													
	Exxon Mobil Corp	X			DIVIDENDS													
	FirstEnergy Corp	X			RENT													
	Blackrock Muni 2020 Term Trust	X			INTEREST													
					CAPITAL GAINS													
					EXCEPTED/BLIND TRUST													
					TAX-DEFERRED													
					Other Type of Income (Specify: e.g., Partnership Income or Farm Income)													
					None													
					\$1-\$200													
					\$201-\$1,000													
					\$1,001-\$2,500													
					\$2,501-\$5,000													
					\$5,001-\$15,000													
					\$15,001-\$50,000													
					\$50,001-\$100,000													
					\$100,001-\$1,000,000													
					\$1,000,001-\$5,000,000													
					Over \$5,000,000													
					Spouse/DC Income over \$1,000,000*													
					None													
					\$1-\$200													
					\$201-\$1,000													
					\$1,001-\$2,500													
					\$2,501-\$5,000													
					\$5,001-\$15,000													
					\$15,001-\$50,000													
					\$50,001-\$100,000													
					\$100,001-\$1,000,000													
					\$1,000,001-\$5,000,000													
					Over \$5,000,000													
					Spouse/DC Income over \$1,000,000*													

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: TIM HARRIS Page 4 of 6

# S/N ASSET NAME	EF	BLOCK A Assets and/or Income Sources	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income												
					A	B	C	D	E	F	G	H	I	J	K	L	M
Blackrock Muniyield Qlty FD Inc	X				None												
Ingenity Corp	X				\$1-\$1,000												
Merck and Co Inc	X				\$1,001-\$15,000												
SP500 Clm Issuer RBC Cap					\$15,001-\$50,000												
FT Ultra350 Target Global DVD	X				\$50,001-\$100,000												
Leaders	X				\$100,001-\$250,000												
Wal-Mart Stores Inc	X				\$250,001-\$500,000												
Westrock Co	X				\$500,001-\$1,000,000												
AG Focused Dividend Strategy CL	X				\$1,000,001-\$5,000,000												
AMERICAN CAPITAL INCOME BUILDER	X				Over \$5,000,000												
FD CL	X				Spouse/DC Income over \$1,000,000*												
Blackrock Muni 2020	X				None	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
Blackrock Muniyield Qlty	X				\$1-\$200	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
Eaton Vance Balanced Fund CL C	X				\$201-\$1,000												
EV Tabs 5 to 75 YR Laddered Muni Bond	X				\$1,001-\$2,500												
FT Umt 7130 Target JPMorgan Chase Plus Bond CL	X				\$2,501-\$5,000												
Select	X				\$5,001-\$15,000												
					\$15,001-\$50,000												
					\$50,001-\$100,000												
					\$100,001-\$250,000												
					\$250,001-\$500,000												
					\$500,001-\$1,000,000												
					Over \$1,000,000												
					Spouse/DC Income over \$1,000,000*												

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: TIM HARRIS

Page 5 of 13

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: Tim H/A M/S | Page 6 of 13

BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset												BLOCK C Type of Income												BLOCK D Amount of Income											
SP. ID.	ASSET NAME	EF																																			
			A	B	C	D	E	F	G	H	I	J	K	L	M																						
	TIAA-CREF National Line MS (Variable)																																				
	Annuity) Growth-Income		X																																		
	Hartford Leaders Plus 1 (Variable)			X																																	
	(Annuity) Ameri Growth&Income																																				
	Hartford Leaders Plus 1 (Variable)		X																																		
	Annuity) MFS MA			X																																	
	Hartford Leaders Plus 1 (Variable)			X																																	
	Annuity) MFS Tilt Return		X																																		
	Griffin Capital Essential Asset REIT		X																																		
	Cash		X																																		
	American Balanced Fund			X																																	
	Growth Fund of America			X																																	
	American Income Fund of America			X																																	
	Class A			X																																	
	New Perspective Fund																																				
	Putnam Equity Income Fund		X																																		
	Putnam Growth & Income Fund			X																																	
	Thompsburg LTD Term Municipal Fund CLC			X																																	
	Transamerica Dynamic Income CLC			X																																	
	C			X																																	
	Washington Mutual Investors Fund		X																																		

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: TIM HAMIS Page: 7 of 13

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: TIM HANAS

Page 8 of 13

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: TIM HANNAH Page 9 of 13

BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset												BLOCK C Type of Income												BLOCK D Amount of Income																					
														A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	IX	X	XI	XII	I	II	III	IV	V	VI	VII	IX	X	XI
SP. DC. IT	ASSET NAME	EIF																																													
	Vanguard Mid Cap Index Adm																																														
	Vanguard S/C Growth Index Adm																																														
	OPERS																																														
	Sooner Save Artisan Mid Cap Value Investor																																														
	Sooner Save T Rowe Price Blue Chip Growth																																														
	Sooner Save Vanguard Target Retirement 2020 Inv																																														
	Sooner Save BlackRock Small Cap Growth Equity Instl																																														
	Sooner Save Artisan Mid Cap Value Chip Growth																																														
	Sooner Save Vanguard Balanced Index Fund																																														
	Wyndham Vacation Resorts Inc Timeshare																																														
	Charles Schwab																																														
	USAA																																														
	Chase USA																																														

Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: **TIM HARRIS**

Page **10** of **12**

Assets and/or Income Sources		BLOCK A												BLOCK B												BLOCK C												BLOCK D											
		Value of Asset												Type of Income												Amount of Income																							
Sp. Dc.	ASSET NAME	Current Year												Preceding Year												BLOCK D																							
		A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII											
	Cash SF Guaranteed	X																																															
	Prim. Divsrd Fd (Barings)	X																																															
	DFA US Large Cap Value Fund	X																																															
	TIAA-CREF Equity Index Fd	X																																															
	T Rowe Price Bl Chp Gwth Fnd	X																																															
	Wells Fargo Spec Mid Cp Val Fd	X																																															
	Columbia Mid Cap Index Fund	X																																															
	Wells Fargo Discovery Fund	X																																															
	DRS US Targeted Value Fund	X																																															
	Prm Oppenheimer Fds Sm Cr Opp Fd	X																																															
	Vanguard Small Cap Index Fund	X																																															
	Oakmark International Fund	X																																															
	Oppenheimer Internet Gr fund	X																																															
	Oppenheimer Real Estate Fund	X																																															

Use additional sheets if more space is required.

SCHEDULE C – EARNED INCOME

Name: Tim Harris

Page 11 of 13

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs and benefits received under the Social Security Act and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See example.

INCOME LIMITS and PROHIBITED INCOME. Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	Type	Current Year to Filing	Amount	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500	
State of Maryland	Salary	\$20,000	\$76,000	
Civil War Reenactable (Oct. 2)	Spouse Speech	\$0	\$1,000	
Ontario County Board of Education	Spouse Salary	N/A	N/A	
Oral Roberts University	Wages	-0-	2,565	
Oklahoma Wesleyan University	Wages	-0-	2,040	
Oklahoma Public Employee Retirement System	Pension	34,128	136,408	
CATC Medstaff PC	Spouse salary	N/A	N/A	
Community Care HMO	Spouse salary	N/A	N/A	

SCHEDULE D - LIABILITIES

Name: TIM HARRIS | Page 13 of 13

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000.

*Column K is for liabilities held solely by your spouse or dependent child.

Creditor SP. DC, JT	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
			A	B	C	D	E	F	G	H	I	J	K
Example: First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE						\$10,001-\$15,000					
							X						
								\$15,001-\$50,000					
								\$50,001-\$100,000					
								\$100,001-\$250,000					
								\$250,001-\$500,000					
								\$500,001-\$1,000,000					
								\$1,000,001-\$5,000,000					
								\$5,000,001-\$25,000,000					
								\$25,000,001-\$50,000,000					
								Over \$50,000,000					
								Over \$1,000,000* (Spouse/DC Liability)					

SCHEDULE E – POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members** and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

Position	Name of Organization
Executive Committee Member	First United Methodist Church
Board Member	Oklahoma Methodist Manor
Board Member	The Demand Project
Board Member	Tulsa Boys Home
President	Tulsa County Sheriff's Foundation
Chairman	Panel to Recommend US Attorney and US Marshall for Northern and Eastern Districts of Oklahoma
Sole Proprietor	Tim Harris RDA Consulting LLC
Trustee	Michael R. Avakian Trust

Use additional sheets if more space is required.

SCHEDULE F – AGREEMENTS

Name: TIM HARRIS
Page 13 of 13

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties to Agreement	Terms of Agreement
	NONE	

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Source (Name and City/State)	Brief Description of Duties
Example: None	Accounting Services

Use additional sheets if more space is required